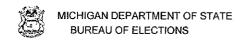


CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

the treasurer (or designated record keeper) and candidate.	3. This Statement covers From: 07/20/08 to 08/25/08		
1. Committee I.D. Number	4. Candidate Last Name First Name M.I.		
150178	Kowalski Cindy L.		
2. Committee Name	4a. Office Sought Including District # or Community Served (If applicable)		
Cindy L. Kowalski for Monitor Township Clerk	Monitor Township Clerk 4b. County of Residence Bay		
5. Committee's Mailing Address	6. Treasurer's Name & Residential Address		
3436 Clover Lane	Cindy L. Kowalski		
Bay City, MI 48706	3436 Clover Lane		
	Bay City, Mi 48706		
Area Code and Phone (989) 667-0878			
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.	Area Code & Phone (989) 667-0878		
7. Treasurer's Business Address	C1		
Charter Township of Monitor	8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)		
2483 Midland Road	Cindy L. Kowalski		
Bay City, MI 48706	3436 Clover Lane Bay City, MI 48706		
	Buy Oity, Wil 40700		
Area Code and Phone (989) 684-7203	Area Code and Phone (989) 667-0878		
9. TYPE OF STATEMENT	Area Code and Phone		
9a. Pre-Election OR 9b. Posi	9c. Annual Statement (Coverage Year) 9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)		
	9e Dissolution of Candidate Committee		
	Effective Date of Dissolution		
Convention	chool Endance Sale of Bissolition		
Special Cau	By checking this item, I/We certify that the committee has no assets or		
Date of Election, Convention or Caucus	outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.		
08/05/08	Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.		
A committee that does not have a Reporting Waiver must file all re	required Campaign Statements. The Campaign Statements must include all applicable enditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold.		
If any of the information listed in items 2, 4, 5, 6, 7, or 8 has chang amendment to the Statement of Organization should accome any floations are the statement of Organization should accome any floations are the statement of Organization should accome any floations.	ged since the information was shown on the committee's Statement of Organization, an this Campaign Statement. If a request for a Reporting Waiver is not received on or that campaign statement cannot be waived.		
 vernication: twe certify that all reasonable diligence was used nylour knowledge and belief the contents are true, accurate and co 	I in the preparation of this statement and attached schedules (if any) and to the best of complete.		
Current Treasurer or Cindy L. Kowalski	Lende L. Kowalshi 08/25/2008		
Designated Record keeper Type or Print Name	Signature Date		
Candidate Cindy L. Kowalski	, lindy L. Kowalshi Date 08/25/2008		
Type or Print Name	Signatuf ³		
-Authority granted under P.A. 388 of 1976			



1. Committee I.D. Number 150178

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name Cindy L. Kowalski for Monitor Township Clerk

CANDIDATE COMMITTEE		
RECEIPTS	Column I	Column II
3. Contributions	This Period	Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 0.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ _\$0.00	(18.) \$ _\$0.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ \$0.00	(19.) \$ \$0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$0.00	(20.) \$ \$0.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$0.00	(21.) \$ \$0.00
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ \$0.00	(22.) \$ \$0.00
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$398.32	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ \$0.00	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>\$0.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ \$398.32	(23.) \$ \$398.32
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)	•	
Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.)\$ \$0.00	
b. Uniternized (less than \$50.01 each - no Schedule)	(10b.) \$ \$0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)		40.00
DEBTS AND OBLIGATIONS	(11.) \$ \$0.00	(24.) \$ \$0.00
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ \$0.00	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ \$0.00	
	BALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) \$ \$498.32	<u> </u>
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period	(14.) + \$ \$0.00	
(Line 5, Total Contributions & Other Receipts)	(15.) = \$_\$498.32	
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period	(16.) - \$ \$398.32	
(Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ \$100.00	*



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number

150178

2. Committee Name Cindy L. Kowalski for Monitor Township Clerk

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1		<u> </u>	
Name Cindy L. Kowalski		08/25/08	\$ 398.32
Address	Purpose: Loan Payment	Date	
3436 Clover Lane	Click H	lere for Memo	Itemization Type
Bay City, MI 48706			Normadion Typo
Fund Raiser	✓ Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name			•
		Date	\$
Address	Purpose:		
	Click H	ere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name	·		
Address	Purpose:	Date	\$
	Click H	ere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		.,
Expenditure #4			
Name			
	_		\$
Address	Purpose:	Date	
	Click He	ere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name			
Address	Purpose:	Date	\$
	Click He	ere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		•
		al this page	\$398.32
	Grand Total of all S		\$398.32
	(Complete on last page	ni odileanie)	,

Enter this total on line 8a of Summary Page



DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number

150178

SCHED	OLE IE
CANDIDATE	COMMITTEE

Cindy L. Kowalski for Monitor Township Clerk

CANDIDATE COMMITTEE 2.0	ommittee Name	AL				
This Schedule itemizes:						
a Debts and obligations owed by or forgiven the committee OR b. Debts and obligations owed to or forgiven by the committee. (Check either a or b. Use only for the purpose checked.)						
Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)		
guarantors, if any. Debt #1 Corp? Yes Owed to or by:	4. Type: Loan	08/25/08 _{\$} 398.32				
Cindy L. Kowalski 3436 Clover Lane Bay City, MI 48706	5. Date Debt Was Incurred: 06/11/08 6. Original Amount of Debt: \$ 1200.00	\$ \$ \$	\$ 398.32	\$_801.68 ✓FORGIVEN		
Debt #2 Corp? Yes		Allic	uni Liluoiseu. 9			
Owed to or by:	Type: Date Debt Was Incurred:	\$ \$				
	6. Original Amount of Debt:	\$ \$	\$	\$FORGIVEN		
If bank loan, name of endorser or guarantor:		\$Am	ount Endorsed: \$			
Debt #3 Corp? Yes		7,17	ount Endorded.			
Owed to or by:	4. Type:	\$				
	6. Original Amount of Debt:	\$	\$	\$FORGIVEN		
If bank loan, name of endorser or guarantor:	*	\$An	nount Endorsed: \$_	- TOKGIVEN		
						
		Page Subtotal	(Outstanding debt)	\$0.00		
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)						
A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.						
Page of		•				